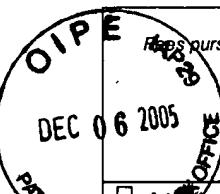


Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

DEC 06 2005

FEES TRANSMITTAL for FY 2005



Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT **(\$1,020)**

Complete if Known	
Application Number	10/671,327
Filing Date	September 25, 2003
First Named Inventor	William L. Hunter
Examiner Name	Edward J. Webman
Art Unit	1616
Attorney Docket No.	110129.405C3

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other (please identify): _____

Deposit Account Deposit Account Number: 19-1090 Deposit Account Name: Seed IP Law Group PLLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments Charge any underpayments or credit any overpayments
of fee(s) under 37 CFR 1.16 and 1.17

Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	<u>Small Entity</u>		<u>Small Entity</u>		<u>Small Entity</u>		
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description

		<u>Small Entity</u>		<u>Small Entity</u>		<u>Small Entity</u>	
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
_____	-20 or HP = _____ X _____ = _____			<u>Fee (\$)</u> <u>Fee Paid (\$)</u>

HP = highest number of total claims paid for, if greater than 20

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____	-3 or HP = _____ X _____ = _____		

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)) the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

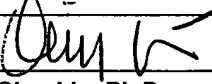
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____	-100 = _____ /50 = _____ (round up to a whole number)		x _____	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Extension-of-time fee **1,020**

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	53,937	Telephone	206-622-4900
Name (Print/Type)	Qing Lin, Ph.D.		Date	December 6, 2005	



EXPRESS MAIL NO. EV 529790652US

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

FY 2005

(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)

Docket Number
110129.405C3

Application Number 10/671,327

Filed September 25,
2003For COMPOSITIONS AND METHODS FOR TREATING OR PREVENTING DISEASES OF BODY
PASSAGEWAYSArt Unit
1616Examiner
Edward J. Webman

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	Fee	Small Entity Fee
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080

Applicant claims small entity status. See 37 CFR 1.27
12/08/2005 DTESEM1 00000001 10671327

A check in the amount of the fee is enclosed. 01 FC:1253 1020.00 OP

Payment by credit card. Form PTO-2038 is attached.

The Director has already been authorized to charge fees in this application to a Deposit Account.

The Director is hereby authorized to charge any fees which may be required or credit any overpayment, to Deposit Account Number 19-1090. I have enclosed a duplicate copy of this sheet.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the applicant/inventor.

assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

attorney or agent of record. Registration No. 53,937

attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34. _____.

Signature

Qing Lin, Ph.D.

Typed or printed name

December 6, 2005

Date

206-622-4900

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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